



## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s)

Kenichi SUZUKI

Serial No.

09/757,547

For

**OPTICAL DISC APPARATUS** 

RECEIVED

SEP 2 4 2003

Filed

January 10, 2001

**Technology Center 2600** 

Examiner

J. Ortiz

Art Unit

2697

745 Fifth Avenue New York, NY 10151 Tel. (212) 588-0800

I hereby certify that this correspondence is being deposited with The United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, Alexandria, VA 22313-1450, on September 17, 2003

Darren M. Simon, Reg. No. 47,946

Name of Applicant, Assignee or Registered Representative

September 17, 2003

Date of Signature

## **AMENDMENT**

Commissioner for Patents Alexandria, VA 22313-1450

Dear Sir:

Responsive to the non-final Office Action which issued June 20, 2003, please consider the following amendment to the above-referenced application.

450100-02931



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Serial No.

09/757,547

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Ortiz, Jorge L.

Art Unit

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**Technology Center 2600** 

COMMISSIONER FOR PATENTS ALEXANDRIA, VA 22313-1450

Transmitted herewith is an amendment in the above-identified application.

Χ	No additional	fee	is	required.
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The fee has been calculated as shown below.

This is an application of a small entity under 37 CFR 1.9(f); and the amounts shown in parentheses apply.

## Claims as Amended

(1)	(2) Claims remaining	(3)	(4) Highest number	(5)	(6)	(7)
	after amendment		previously paid for	Present extra	Rate	Additional fee
Total claims	10	Minus	= 20	0 ×	\$18(9)	= \$00.00
Independent claims	2	Minus	= 3	0 ×	\$84(42)	= \$ .00
				onal fee for endment		\$ .00

If the entry in Colu	umn 2 is less than the entry	in Column 4, write "0" in Column 5.
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	This application contains a multiple dependent claim.	The required fee of \$260 (\$130) has been previously paid $\_$ , or is paid h	erewith
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This response is being filed within	in the month following the	expiration of the term originally set therefor.
This is a petition to request a	month extension of time.	A check covering the cost of the petition is enclosed.

A check in the amount of \$	is attached,	which covers	the cost of	additional claims	petition
for extension of time.					

Charg	e \$ to Depo	sit Account No.	50-0320.

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Darren M. Simon, Reg. No. 47,946

Name of Applicant, Assigned or Registered Representative

Signature

September 17, 2003

Date of Signature

FROMMER LAWRENCE & HAUG, LLP Attorneys for Applicant(s)

By: Darren M. Simon Reg. No. 47,946 Tel. (212) 588-0800

If the highest number of total claims previously paid for is less than 20, write "20" in this space.

If the highest number of independent claims previously paid for is less than 3, write "3" in this space.

<sup>&</sup>lt;u>X</u> Please charge any additional fees incurred by reason of this response or credit any overpayment to Deposit Account No. 50-0320.